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UTILITY PATENT APPLICATION TRANSMITTAL

Address to: Box PATENT APPLICATION			Attorney Doc	ket No.	CHAN3231/EM						
Commissioner of Patents			First Named (or identifier)	Inventor	Yi-Yang CHANG	970 1					
P.O. Box 1450 Alexandria, VA 22313-1450		Total Pages		38	J.S. PTO 7581						
					nt applica	ation under	37 CFR 1.53(b).	71			
Entitled: Clock Down Sensor						1688					
×	1. Submitted herewith are the following: 11 pages of specification, including claims and Abstract.										
		5 sheets of FORMAL drawings (Figs. 1-5). 14 claims. 1 Oath/Declaration signed by each inventor. 1 Application Data Sheet. 1 Assignment of the invention to Asia Optical Co., Ltd., Taichung Hsien, Taiwan, R.O.C., Cover Sheet, and payment of the \$40 recordal fee. 1 certified copy of Taiwan application no. 092124797. Priority is claimed. 1 check in the amount of \$810 (\$770- Filing Fee; \$40- Assignment Recordation Fee).									
	2.	SMALL ENTITY STATUS IS ASSERTED pursuant to 37 CFR 1.27 for this application.									
⊠	3.	The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17, to Deposit Account No. 02-0200.									
	4.	Insert before the first sentence of the specification: This application claims the benefit of provisional application number filed									
	5.	Insert before the first sentence of the specification: This application is a Continuation-in-part of nonprovisional application number filed									
	6.	Other:									
The registered practitioners representing applicant(s) are J. Ernest Kenney, Reg. No. 19,179; Eugene Mar, Reg. No. 25,893; Richard E. Fichter, Reg. No. 26,382; Thomas J. Moore, Reg. No. 28,974; Joseph DeBenedictis, Reg. No. 28,502; and Benjamin E. Urcia, Reg. No. 33,805.											
THE FILING FEE IS CALCULATED AS FO			LLOWS:		Basic Fee:	\$770.00					
	•	Total Claims:	14	- 20 =		0	X \$18 =	\$0.00			
Independent Claims: 2 - 3 =		- ·-·	0	X \$86 =	\$0.00						
Correspondence Address: BACON & THOMAS, PLLC 625 Slaters Lane, 4 th Floor Alexandria, VA 22314-1176		4	Multiple Dep	Multiple Dependent Claim (add \$290.00):							
			CUSTOMER NUMBER			Subtotal:					
			_	50% Re	50% Reduction if Small Entity Status:						
Phone: 703-683-0500 Fax: 7		3-683-108	0	Total:	\$770.00						
	Dat	te:		Name:		Signature: F		Reg. No.			
Nove	November 21, 2003 Eugene Mar			25,893							